## COMBINED DECLARATION AND POWER OF ATTORNEY (BY INVENTOR) FOR PATENT APPLICATION

As a below named inventor, I hereby dec	clare that:	
My residence, post office address and cit	tizenship are as stated below	v next to my name.
inventor (if plural names are listed below	v) of the subject matter which AL TOOTHPASTE AND	is listed below) or an original, first and joint ch is claimed and for which a patent is sought on <b>MOUTHWASH FORMULATIONS</b> , the checked:
was filed on July 8, 2003 Application Number 10/615,588	in United States A and was amende	pplication Number or PCT International d on (if applicable).
I hereby state that I have reviewed and u claims, as amended by any amendment rematerial to patentability as defined in Tit	eferred to above. I acknow	te above identified specification, including the ledge the duty to disclose information which is ulations, §1.56.
I hereby claim the benefit under 35 U.S.	C. §119(e) of any United St	ates Provisional applications listed below:
60/394,333 (Application Number)	July 8, 2 (Filing o	2002 late)
insofar as the subject matter of each of tapplication in the manner provided by the to disclose information which is material	he claims of this application e first paragraph of Title 35 to patentability as defined	ny United States application(s) listed below and, in is not disclosed in the prior United States, United States Code, §112, I acknowledge the duty in Title 37, Code of Federal Regulations, §1.56 ion and the national or PCT International filing
(Application No.) (Filing Date	(Status -	patented, pending, abandoned)
I hereby appoint the following attorney(s the Patent and Trademark Office connect Laura G. Barrow, Esq Reg. No. 35, 43 Address all telephone calls to Laura G. I Address all correspondence to:	ted therewith:	ate this application and to transact all business in
information and belief are believed to be willful false statements and the like so m	true; and further that these ade are punishable by fine of	ge are true and that all statements made on statements were made with the knowledge that or imprisonment, or both, under Section 1001 of ents may jeopardize the validity of the application
Full name of sole or first inventor (given Inventor's signature:  Residence:  Post Office Address:  Galveston, 921 Marine	S. Ifen G	Date: <u>Nov. 26, 2003</u> Citizenship: <u>U.S.A.</u>

Atty dkt: WRC/8B